

PTO/SB/07 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)							Application Number		Filing Date			
							Applicant(s)					
							Thomas G. Krajewski et al.					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	CANCELLED						51		41			
2	CANCELLED						52		41			
3	CANCELLED						53		52			
4	CANCELLED						54		48			
5	CANCELLED						55	CANCELLED				
6	CANCELLED						56	CANCELLED				
7	CANCELLED						57	CANCELLED				
8	CANCELLED						58	CANCELLED				
9	CANCELLED						59	CANCELLED				
10	CANCELLED						60	CANCELLED				
11	CANCELLED						61	CANCELLED				
12	CANCELLED						62	CANCELLED				
13	CANCELLED						63	CANCELLED				
14	CANCELLED						64	CANCELLED				
15	CANCELLED						65	CANCELLED				
16	CANCELLED						66	CANCELLED				
17	CANCELLED						67	CANCELLED				
18	CANCELLED						68	CANCELLED				
19	CANCELLED						69	CANCELLED				
20	CANCELLED						70	CANCELLED				
21	CANCELLED						71	CANCELLED				
22	CANCELLED						72	CANCELLED				
23	CANCELLED						73	CANCELLED				
24	CANCELLED						74	CANCELLED				
25	CANCELLED						75	CANCELLED				
26	CANCELLED						76	CANCELLED				
27	CANCELLED						77	CANCELLED				
28	CANCELLED						78	CANCELLED				
29	CANCELLED						79	CANCELLED				
30	CANCELLED						80	CANCELLED				
31	CANCELLED						81	CANCELLED				
32	CANCELLED						82	CANCELLED				
33	CANCELLED						83	CANCELLED				
34	CANCELLED						84	CANCELLED				
35	CANCELLED						85	CANCELLED				
36	CANCELLED						86	CANCELLED				
37	CANCELLED						87	CANCELLED				
38	CANCELLED						88	CANCELLED				
39	CANCELLED						89	CANCELLED				
40	Ind.						90	CANCELLED				
41		40					91	Ind.				
42		41					92		91			
43		42					93		91			
44		43					94		92			
45		43					95		91			
46		40					96		92			
47		41					97		92			
48		40					98		94			
49		41					99		92			
50		41					100		99			
Total							Total					
Indep							Indep					
Total							Total					
Depend							Depend					
Total							Total					
Claims							Claims					

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
101		95					51					
102	CANCELED						52					
103	CANCELED						53					
104	CANCELED						54					
105	CANCELED						55					
106	CANCELED						56					
107	CANCELED						57					
108	CANCELED						58					
109	CANCELED						59					
110	CANCELED						60					
111	CANCELED						61					
112	CANCELED						62					
113	Ind.						63					
114		113					64					
115	Ind.						65					
116		115					66					
117	CANCELED						67					
118	CANCELED						68					
119	CANCELED						69					
120	CANCELED						70					
121	CANCELED						71					
122	Ind.						72					
123	CANCELED						73					
124	CANCELED						74					
125	Ind.						75					
126		120					76					
127	CANCELED						77					
128	CANCELED						78					
129	CANCELED						79					
130	CANCELED						80					
131	CANCELED						81					
132	Ind.						82					
133	Ind.						83					
134	Ind.						84					
135		113					85					
136	Ind.						86					
137		115					87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	10						Total Indep					
Total Depend	29						Total Depend					
Total Claims	39						Total Claims					

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